

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

| CLAIMS       |     |                     |     |                     |     |  |
|--------------|-----|---------------------|-----|---------------------|-----|--|
| AS FILED     |     | AFTER 1ST AMENDMENT |     | AFTER 2ND AMENDMENT |     |  |
| IND          | DEP | IND                 | DEP | IND                 | DEP |  |
| 1            |     |                     |     |                     |     |  |
| 2            |     |                     |     |                     |     |  |
| 3            |     |                     |     |                     |     |  |
| 4            |     |                     |     |                     |     |  |
| 5            |     |                     |     |                     |     |  |
| 6            |     |                     |     |                     |     |  |
| 7            |     |                     |     |                     |     |  |
| 8            |     |                     |     |                     |     |  |
| 9            |     |                     |     |                     |     |  |
| 10           |     |                     |     |                     |     |  |
| 11           |     |                     |     |                     |     |  |
| 12           |     |                     |     |                     |     |  |
| 13           |     |                     |     |                     |     |  |
| 14           |     |                     |     |                     |     |  |
| 15           |     |                     |     |                     |     |  |
| 16           |     |                     |     |                     |     |  |
| 17           |     |                     |     |                     |     |  |
| 18           |     |                     |     |                     |     |  |
| 19           |     |                     |     |                     |     |  |
| 20           |     |                     |     |                     |     |  |
| 21           |     |                     |     |                     |     |  |
| 22           |     |                     |     |                     |     |  |
| 23           |     |                     |     |                     |     |  |
| 24           |     |                     |     |                     |     |  |
| 25           |     |                     |     |                     |     |  |
| 26           |     |                     |     |                     |     |  |
| 27           |     |                     |     |                     |     |  |
| 28           |     |                     |     |                     |     |  |
| 29           |     |                     |     |                     |     |  |
| 30           |     |                     |     |                     |     |  |
| 31           |     |                     |     |                     |     |  |
| 32           |     |                     |     |                     |     |  |
| 33           |     |                     |     |                     |     |  |
| 34           |     |                     |     |                     |     |  |
| 35           |     |                     |     |                     |     |  |
| 36           |     |                     |     |                     |     |  |
| 37           | 2   |                     |     |                     |     |  |
| 38           |     |                     |     |                     |     |  |
| 39           |     |                     |     |                     |     |  |
| 40           |     |                     |     |                     |     |  |
| 41           |     |                     |     |                     |     |  |
| 42           |     |                     |     |                     |     |  |
| 43           |     |                     |     |                     |     |  |
| 44           |     |                     |     |                     |     |  |
| 45           |     |                     |     |                     |     |  |
| 46           |     |                     |     |                     |     |  |
| 47           |     |                     |     |                     |     |  |
| 48           |     |                     |     |                     |     |  |
| 49           |     |                     |     |                     |     |  |
| 50           |     |                     |     |                     |     |  |
| TOTAL IND.   |     |                     |     |                     |     |  |
| TOTAL DEP.   |     |                     |     |                     |     |  |
| TOTAL CLAIMS |     |                     |     |                     |     |  |
| 51           |     |                     |     |                     |     |  |
| 52           |     |                     |     |                     |     |  |
| 53           |     | 1                   |     |                     |     |  |
| 54           |     | 1                   |     |                     |     |  |
| 55           | 1   |                     |     |                     |     |  |
| 56           |     | 1                   |     |                     |     |  |
| 57           |     | 1                   |     |                     |     |  |
| 58           | 1   |                     |     |                     |     |  |
| 59           |     | 1                   |     |                     |     |  |
| 60           |     | 1                   |     |                     |     |  |
| 61           |     | 1                   |     |                     |     |  |
| 62           |     | 1                   |     |                     |     |  |
| 63           |     | 1                   |     |                     |     |  |
| 64           |     | 1                   |     |                     |     |  |
| 65           |     | 1                   |     |                     |     |  |
| 66           |     | 1                   |     |                     |     |  |
| 67           |     | 1                   |     |                     |     |  |
| 68           | 1   |                     |     |                     |     |  |
| 69           |     |                     |     |                     |     |  |
| 70           |     |                     |     |                     |     |  |
| 71           |     |                     |     |                     |     |  |
| 72           | 1   |                     |     |                     |     |  |
| 73           | 1   |                     |     |                     |     |  |
| 74           |     |                     |     |                     |     |  |
| 75           |     |                     |     |                     |     |  |
| 76           |     | 2                   |     |                     |     |  |
| 77           |     | 2                   |     |                     |     |  |
| 78           |     | 2                   |     |                     |     |  |
| 79           |     | 2                   |     |                     |     |  |
| 80           |     | 2                   |     |                     |     |  |
| 81           |     | 2                   |     |                     |     |  |
| 82           |     | 2                   |     |                     |     |  |
| 83           |     | 2                   |     |                     |     |  |
| 84           |     | 2                   |     |                     |     |  |
| 85           |     |                     |     |                     |     |  |
| 86           |     |                     |     |                     |     |  |
| 87           |     |                     |     |                     |     |  |
| 88           |     |                     |     |                     |     |  |
| 89           |     |                     |     |                     |     |  |
| 90           |     |                     |     |                     |     |  |
| 91           |     |                     |     |                     |     |  |
| 92           |     |                     |     |                     |     |  |
| 93           |     |                     |     |                     |     |  |
| 94           |     |                     |     |                     |     |  |
| 95           |     |                     |     |                     |     |  |
| 96           |     |                     |     |                     |     |  |
| 97           |     |                     |     |                     |     |  |
| 98           |     |                     |     |                     |     |  |
| 99           |     |                     |     |                     |     |  |
| 100          |     |                     |     |                     |     |  |
| TOTAL IND.   | 6   |                     |     |                     |     |  |
| TOTAL DEP.   |     |                     |     |                     |     |  |
| TOTAL CLAIMS | 87  |                     |     |                     |     |  |